

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000108041

FILED
Oct 20, 2009
Secretary of State**Entity Name:** TAMPA CARGO LOGISTICS, INC.**Current Principal Place of Business:**1650 NW 66TH AVENUE BUILDING 706, STE 202
MIAMI, FL 33122**New Principal Place of Business:****Current Mailing Address:**1650 NW 66TH AVENUE BUILDING 706, STE 202
MIAMI, FL 33122**New Mailing Address:****FEI Number:** 74-3107287**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 US**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PLATA, RODRIGO
Address: 1650 NW 66TH AVE, BLDG 708, STE 206
City-St-Zip: MIAMI, FL 33122

Title: DT () Delete
Name: BERMUDEZ, JOSE ANTONIO
Address: 1650 NW 66TH AVE, BLDG 708, STE 206
City-St-Zip: MIAMI, FL 33122

Title: DS () Delete
Name: LOPEZ, ABEL
Address: 1650 NW 66TH AVE, BLDG 708, STE 206
City-St-Zip: MIAMI, FL 33122

Title: D () Delete
Name: ARBELAEZ, FELIPE
Address: 1650 NW 66TH AVE, BLDG 708, STE 206
City-St-Zip: MIAMI, FL 33122

Title: MGR () Delete
Name: BRICENO, JOSE
Address: 1650 NW 66TH AVE, BLDG 708, STE 206
City-St-Zip: MIAMI, FL 33122

Title: D () Delete
Name: MOLINA, ALEJANDRO
Address: 1650 NW 66TH AVE., BLDG 708, SUITE 206
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MEOLA DE FEX, EDUARDO
Address: 1650 NW 66TH AVE, BLDG 708, STE 206
City-St-Zip: MIAMI, FL 33122

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RODRIGO PLATA

DP

10/20/2009

Electronic Signature of Signing Officer or Director

Date